

# Yorkshire Ambulance Service MHS



NHS Trust

#### An Aspirant Foundation Trust

				-	NG DATE			
Trust Board Mee	Public		29/03/2016					
TITLE of PAPER		Quarterly Update A&E PA		PAPE	APER REF		7.1	
STRATEGIC		Deliver timely and seamless emergency and urgent care in						
OBJECTIVE		the most approp			J J -	-	3.	
		Create, attract and retain an enhanced and skilled workforce						
		to meet service needs now and in the future						
PURPOSE OF THE PAPER		The purpose of this document is to provide an update on the workforce numbers, skills and grade that underpin the A&E delivery for the next 12 months as outlined within the A&E Transformation business case.						
For Approval			Fo	or Assurance				
For Decision			Dis	iscussion/Information		า		
AUTHOR /	Keelev	 Townend	AC	COUNTABLE	Dr N	lac	cklin, Executive	
LEAD		nme Director					or of Operations	
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PREVIOUSLY		Committee/Group:				Date:		
AGREED AT:		Choose an item.			CI	Click to enter date		
<ul> <li>RECOMMENDATION</li> <li>It is recommended that the Trust Board</li> <li>The current position of staff in post by grade and skill</li> <li>The progress made on staffing since September 2015 and the variation against the business plan at this stage</li> <li>The expected position in March 2017 (subject to contract negotiations and budget agreement through the Business planning processes)</li> </ul>					2015 and age contract			
<b>RISK ASSESS</b>	MENT						Yes	No
Corporate Risk Register and/or Board Assurance Framework								
amended If 'Yes' – expand in Section 4. / attached paper								
Resource Implications (Financial, Workforce, other - specify) If 'Yes' – expand in Section 2. / attached paper					$\boxtimes$			
Legal implications/Regulatory requirements If 'Yes' – expand in Section 2. / attached paper								
Equality and Diversity Implications If 'Yes' – please attach to the back of this paper								
ASSURANCE/COMPLIANCE								
Choose a DOMAIN			1: Safe 2: Effective 4: Responsive					
Monitor Quality Governance Framework 1: Ensuring required s			sta	Indard	sare			
Choose a DOMAIN			achieved					

# 1. PURPOSE

1.1. The purpose of this document is to provide an update on the workforce numbers, skills and grade that underpin the A&E delivery for the next 12 months as outlined within the A&E Transformation business case.

# 2. BACKGROUND

- 2.1. As part of the A&E Transformation Programme, work was undertaken in conjunction with ORH LTD to determine the staff required (2282 full time equivalent (fte)) to achieve the national response targets and associated quality indicators.
- 2.2. There was also a recommendation to make the clinical supervisors supernumerary to ensure that they could provide the necessary support (identified in the CQC report) required for the front line staff for example PDRs/ 1to1/ training & development.
- 2.3. This formed the basis of the workforce plan detailed in the A&E business case that went to the Board on 15 December 2015.
- 2.4. Subsequently to this, the paramedic career development has been agreed with Trade Unions in February 2016, which enables paramedics to progress to band 6. The financial implications of this have now been factored into the A&E service line budget for 16/17 and have resulted in the need to identify a further £1.2m of CIP to manage the cost pressure.

# 3. WORKFORCE CURRENT POSITION

3.1. Table one below shows the current staff in post against the different the business plan by the various roles:

	Feb-16			
	<b>Business</b> Plan	In Post		Variance
<b>Total A&amp;E FTE</b>	2,177	2,119	-	58
CS	124	122	-	2
Frontline FTE	2,053	1,998	-	55
ECA	543	541	-	2
EMT1	254	285		31
EMT2	302	291	-	11
B5 Para*	828	754	-	74
B6 Para	125	124	-	1
UCP	1	3		2

<sup>\*</sup> new career development agreement to move to band 6

Table one: workforce position Feb 2016

3.2. In terms of front line 59% clinical 41% non-clinical and of the clinical staff 75% are paramedics.

# 4. WORKFORCE CHANGES SINCE SEPTEMBER 2015

- 4.1. In summary some key highlights since September 2015 to February 2016 are:
  - 169 fte new starters recruited into the service since September 2015 against a plan of 158 fte (122wte non-clinical, 47wte clinical).
  - 74 fte attended conversion courses against a plan of 112 fte.(38 fte non-clinical, 36 fte clinical). The variation was the cancellation of a course in October and lower numbers than planned in September, since then progress has been on track.
  - Attrition is tracking under plan, 69 fte versus 85 fte in plan
  - Overall workforce numbers into the service have increased by 69 fte in 6 months
- 4.2. Mitigation plans have been put in place to manage the variance with the recruitment and training team against the plan.

# 5. WORKFORCE PLAN 2016 / 2017

- 5.1. The workforce plan for 2016/17, as outlined in the business plan, forms the basis of the Performance Trajectory submitted to the Trust Development Agency and is linked to the financial settlement, yet to be agreed, with commissioners.
- 5.2. Table two identifies the position expected at the end of March 2017, which is a net increase of frontline staff by 128fte from February 2016 position.

	Mar-17				
	Business Plan	In Post	Variance		
<b>Total A&amp;E FTE</b>	2,287	2,239	- 48		
CS	124	113	- 11		
Frontline FTE	2,163	2,126	- 37		
ECA	652	675	24		
EMT1	298	237	- 61		
EMT2	299	301	2		
B5 Para*	789	798	9		
B6 Para	125	113	- 12		
UCP	1	3	2		

\* new career development agreement to move to band 6

#### Table two: workforce position expected March 2017

5.3. The end position at the end of March 2017 takes the workforce to 2126fte frontline staff, excluding clinical supervisors. This is 37fte off the business plan target of 2163 fte.

- 5.4. The 2163 fte was agreed as the staff number to recruit to, keeping 5% of the required workforce (2282 fte) as a flexible overtime budget, which could also be adjusted if the assumptions within the business plan change for example demand or productivity improvements.
- 5.5. It is anticipated that 463 fte band 5 paramedics during 2016/17 will move into band 6 based on their current skills / spine point as agreed in the career development framework.
- 5.6. **Appendix one** provides the month on month detail of the workforce plan for 2016/17 identifying the recruitment, training and attrition assumptions to deliver this.
- 5.7. In summary the requirements for the service for 2016/17 are:
  - Recruitment of 288 fte new staff
  - Conversion of 56 fte existing staff
  - Attrition of 168 fte excluding clinical supervisors
- 5.8. It should be noted that these staffing levels form part of the business planning and budget process for 2016/17 which are still to be agreed and do not reflect any potential changes (benefits) to recruitment/attrition as a result of offering paramedics Band 6.
- 5.9. The training conversions in the business plan were determined to ensure the right skill mix was in place (clinical / non-clinical) identified through the ORH work. However subsequent discussions outside the programme with Trade Unions around paramedic career development to band 6 and the Band 3 to Band 4 progression include some further developmental training.
- 5.10. Table three below identifies the conversion courses within the business plan and the additional courses that could be delivered if required post July to support the career development framework.

	Business Plan Training	Opportunity
<b>Total A&amp;E FTE</b>	56	164
CS	-	-
Frontline FTE	56	164
ECA	-	-
EMT1	36	84
EMT2	20	80
B5 Para*	-	-
B6 Para	-	-
UCP	-	-

Table three: Conversion Training Opportunity

5.11. The financial implications both in terms of grade change and abstraction to achieve this additional training between band 3 and band

4 are being reviewed and will be finalised once the contract settlement has been finalised.

## 6. **RECOMMENDATIONS**

- 6.1. It is recommended that the Trust Board
  - The current position of staff in post by grade and skill
  - The progress made on staffing since September 2015 and the variation against the business plan at this stage
  - The expected position in March 2017 (subject to contract negotiations and budget agreement through the Business planning processes)

### 7. APPENDICES

7.1. Appendix one – workforce plan 2016/17